


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 19, 2007 8:00 am**  
**Secretary of State**

04-19-2007 90209 035 \*\*\*150.00

**DOCUMENT # P03000029136**

1. Entity Name  
**JDD GROUP, INC.**



Principal Place of Business  
**801 NW 72 AVE  
 FORT LAUDERDALE, FL 33317**

Mailing Address  
**801 NW 72 AVE  
 FORT LAUDERDALE, FL 33317**

2. Principal Place of Business - No P.O. Box #  
**10458 132 Terr N**  
 Suite, Apt. #, etc.

3. Mailing Address  
**10458 132 Terr N**  
 Suite, Apt. #, etc.

City & State  
**Jupiter, FL**

Zip  
**33478**

Country  
**US.**

40071140



04032007 Chg-P CR2E034 (12/06)

4. FEI Number  
**65-1178674**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**DEKA, JANET  
 801 NW 72ND AVE  
 FORT LAUDERDALE, FL 33317**

7. Name and Address of New Registered Agent

Name  
**DEKA, JANET**

Street Address (P.O. Box Number is Not Acceptable)  
**10458 132 Terr N**

City  
**Jupiter**

State  
**FL**

Zip Code  
**33478**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Janet Deka* DATE 4/11/07

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEKA, JANET 801 NW 72 AVE FORT LAUDERDALE, FL 33317	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEKA, DONALD D JR. 801 NW 72 AVE FORT LAUDERDALE, FL 33317	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEKA, JANET 10458 132 Terr N JUPITER, FL 33478	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEKA, DONALD D JR. 10458 132 Terr N JUPITER, FL 33478	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Janet Deka Janet Deka* DATE 4/11/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #